



FREQUENTLY ASKED QUESTIONS

Answers to commonly asked questions about 2024 GDA Group Health Plans:

- **Who is GDA's group plan healthcare provider?**

Anthem Blue Cross Blue Shield.

- **What type of plans are being offered?**

All plans are Open Access Point of Service plans. This means you have in-network and out-of-network coverage and a referral from your Primary Care Provider (PCP) is not required to visit a specialist.

- **Is this a broad provider network plan?**

All of our GDA group health plans have broad networks. This means you have thousands more choices of providers over a narrow network and are much more likely to work with providers, labs, and specialists within your network – reducing the likelihood of surprise charges.

- **Are any of the plans Health Savings Account compatible?**

Yes, our HDHP plan qualifies for a Health Savings Account. If you sign up for a HDHP plan, you will then work with your financial institution to set up an HSA.

- **Are the premiums age banded?**

No! You are not rated based on your age as you would be on an individual plan.

- **Are there any health questions?**

No! Your enrollment form includes no questions about your health history. You are not rated on your preexisting conditions or health as you could be on an individual plan.

- **Where can I check to see if my provider is in network?**

Visit our website at www.gdaplus.com/health and click on the Find a Provider link. Members not currently enrolled should select “Use Member ID for Basic Search” and enter “XKT” and answer the prompts.

- **Is there a limit on the doctor visit copays per year?**

No, you may visit your doctor as many times as you need. Other plans could limit your visits to a certain number per year and then require you to pay your deductible and coinsurance for visits beyond that limit. On our plan, you are only responsible for your copay for doctor office visits.

- **Does the dentist have to be a member of the GDA?**

Yes, because our plans are group health plans, dentists are required to be a GDA member to participate and/or offer it to their staff.

- **Can dental practice employees enroll in the health insurance?**

Yes, as long as the dentist offers it to employees and the dentist is eligible by membership in the Georgia Dental Association. However, the dentist does not have to be enrolled in the plan to offer it to employees.

- **Does a GDA member have to enroll in the health insurance plan in order for the staff to participate?**

No, a GDA member dentist does not have to enroll but he does have to offer it in order for office employees to participate.

- **Is there a minimum number of staff that must enroll?**

No, there is no minimum participation requirement for employees. Even if only one office employee would like to participate, your office is eligible with GDA membership.

- **Am I required to subsidize the premiums?**

As long as there are fewer than 50 employees, a dentist is not required to subsidize employee premiums.

- **Does a GDA member have to offer health plans to employees?**

No, members are not required to offer GDA group health plans to employees. However, we do encourage the office to offer it as there is no required expense for members to do so.

- **Can an employee call the GDA directly to ask questions?**

Yes, employees can call us at **770-395-0224**.

- **How do I enroll?**

Member dentists and employees should complete the enrollment form and fax to **404.633.3943** or e-mail it to **christy@gadental.org**.

- **What is the GDIS Group ID Billing Number on the enrollment form?**

This is our internal billing number for existing clients. If you are currently enrolled, you can find this on your monthly billing statement. If you are not enrolled, it will be assigned to you once your enrollment form is received.

- **How is billing handled?**

The GDA will email or mail one bill to each office on or about the 25th of every month for the following month's premium(s); payment is due by the 5th of the month that is covered by the premium. If a practice offers employee coverage, staff premiums can be paid directly to GDA Health and Welfare Plan by either the dentist or employees. Yes, that means that the dentist does not have to set up payroll deductions for the employees.

Yes, we can also bill the employee directly!

- **How is payment handled?**

Premium payments are required to be paid via a monthly recurring credit or debit card. Payments are processed on the 5th of each month.

